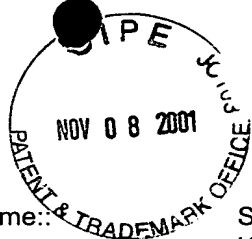


Inventor Information



Inventor One Given Name:: Sue J.
Family Name:: Kenwick
Postal Address Line One:: 72 Glebe Road
City:: Cambridge
Country:: United Kingdom
Postal or Zip Code:: CB1 7SZ
City of Residence:: Cambridge
Country of Residence:: United Kingdom
Citizenship Country:: United Kingdom

Inventor Two Given Name:: David L.
Family Name:: Nelson
Postal Address Line One:: 4106 Tennyson
City:: Houston
State or Province:: Texas
Postal or Zip Code:: 77005
City of Residence:: Houston
State or Prov. of Residence:: Texas
Citizenship Country:: USA

Inventor Three Given Name:: Swaroop
Family Name:: Aradhya
Postal Address Line One:: 7777 Greenbriar Dr.
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State or Province:: Texas
Postal or Zip Code:: 77030
City of Residence:: Houston
State or Prov. of Residence:: Texas
Citizenship Country:: India

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Family Name:: D'Urso
Postal Address Line One:: Via Adolfo Omodeo n. 45
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Country:: Italy
Postal or Zip Code:: 80128
City of Residence:: Napoli
Country of Residence:: Italy
Citizenship Country:: Italy

Inventor Five Given Name:: Hayley
Family Name:: Woffendin
Postal Address Line One:: 9 Caribou Way
Postal Address Line Two:: Cherry Hinton
City:: Cambridge
Country:: United Kingdom
Postal or Zip Code:: CB1 9XF
City of Residence:: Cambridge
Country of Residence:: United Kingdom
Citizenship Country:: United Kingdom

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Family Name:: Munnich
Postal Address Line One:: 22, Rue saint andre des arts
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Country:: France
Postal or Zip Code:: 75006
City of Residence:: Paris
Country of Residence:: France
Citizenship Country:: France

Inventor Seven Given Name:: Asmae
Family Name:: Smahi
Postal Address Line One:: 18, Avenue des marroniers
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Country:: France
Postal or Zip Code:: 93400
City of Residence:: Saint Ouen
Country of Residence:: France
Citizenship Country:: Algeria

Inventor Eight Given Name:: Alain
Family Name:: Israel
Postal Address Line One:: 20, rue Daguerre
City:: Paris
Country:: France
Postal or Zip Code:: 75014
City of Residence:: Paris
Country of Residence:: France
Citizenship Country:: France

Inventor Nine Given Name:: Annemarie
Family Name:: Poustka
Postal Address Line One:: Ladenburger Str. 41
City:: Heidelberg
Country:: Germany
Postal or Zip Code:: 69120
City of Residence:: Heidelberg
Country of Residence:: Germany
Citizenship Country:: Austria

Inventor Ten Given Name:: Richard A.
Family Name:: Lewis
Postal Address Line One:: 11223 Hermosa Court
City:: Houston
State or Province:: Texas
Postal or Zip Code:: 77024
City of Residence:: Houston
State or Prov. of Residence:: Texas
Citizenship Country:: USA

Inventor Eleven Given Name::
Family Name::
Postal Address Line One::
City::
State or Province::
Postal or Zip Code::
City of Residence::
State or Prov. of Residence::
Citizenship Country::

Moise
Levy
6624 Rutgers
Houston
Texas
77005
Houston
Texas
USA

Inventor Twelve Given Name::
Family Name::
Postal Address Line One::
City::
Country::
Postal or Zip Code::
City of Residence::
Country of Residence::
Citizenship Country::

Nina
Heiss
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Germany
69115
Heidelberg
Germany
Germany

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Electronic Mail One::

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Application Information

Title Line One::
Title Line Two::
Title Line Three::
Docket Number::

DIAGNOSIS AND TREATMENT OF MEDICAL
CONDITIONS ASSOCIATED WITH DEFECTIVE
NFKAPPA B (NF-κB) ACTIVATION
HO-P01961US1
(10012778 / OTA 00-63)

Representative Information

Representative Customer Number::

26,271

Continuity Information

This application is a::
>Application One::
FilingDate::

Non Prov. of Provisional
60/206,223
May 22, 2000

[illegible]

Sue J.
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Hills Road
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United Kingdom
CB2 2XY
Cambridge
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Title Line One::
Title Line Two::
Title Line Three::
Docket Number::

DIAGNOSIS AND TREATMENT OF MEDICAL CONDITIONS ASSOCIATED WITH DEFECTIVE NFKAPPA B(NF- κ B) ACTIVATION
HQ-P01961US1

Representative Customer Number::

26,271

This application is a:
>Application One::
FilingDate::

Non Prov. of Provisional
60/206,223
May 22, 2000

Inventor Information

Inventor Two Given Name::
Family Name::
Postal Address Line One::
City::
Country::
Postal or Zip Code::
City of Residence::
Country of Residence::

Hayley
Woffendin

Cambridge
United Kingdom

Cambridge
United Kingdom

Correspondence Information

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Fax One::
Electronic Mail One::

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Application Information

Title Line One::
Title Line Two::
Title Line Three::
Docket Number::

DIAGNOSIS AND TREATMENT OF MEDICAL CONDI
TIONS ASSOCIATED WITH DEFECTIVE NFKAPPA
B(NF-κB) ACTIVATION
HO-P01961US1

Representative Information

Representative Customer Number::

26,271

Continuity Information

This application is a::
>Application One::
FilingDate::

Non Prov. of Provisional
60/206,223
May 22, 2000

Fulltext = 64063360

Inventor Information

Inventor Three Given Name::
Family Name::
Postal Address Line One::
City::
Country::
Postal or Zip Code::
City of Residence::
Country of Residence::

Arnold
Munnich

Paris
France

Paris
France

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Application Information

Title Line One::
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Title Line Three::
Docket Number::

DIAGNOSIS AND TREATMENT OF MEDICAL CONDITIONS ASSOCIATED WITH DEFECTIVE NFKAPPA B(NF- κ B) ACTIVATION
HQ-P01961US1

Representative Information

Representative Customer Number::

26,271

Continuity Information

This application is a:
>Application One::
FilingDate::

Non Prov. of Provisional
60/206,223
May 22, 2000

106630 6402360

Inventor Information

Inventor Four Given Name:: Asmae
Family Name:: Smahi
Postal Address Line One::
City:: Saint Ouen
Country:: France
Postal or Zip Code::
City of Residence:: Saint Ouen
Country of Residence:: France

Correspondence Information

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Application Information

Title Line One::
Title Line Two::
Title Line Three::
Docket Number:: DIAGNOSIS AND TREATMENT OF MEDICAL CONDI
TIONS ASSOCIATED WITH DEFECTIVE NFKAPPA
B(NF-κB) ACTIVATION
HO-P01961US1

Representative Information

Representative Customer Number:: 26,271

Continuity Information

This application is a:: Non Prov. of Provisional
>Application One:: 60/206,223
FilingDate:: May 22, 2000

Inventor Information

Inventor Five Given Name::
Family Name::
Postal Address Line One::
City::
Country::
Postal or Zip Code::
City of Residence::
Country of Residence::

Alain
Israel

Paris
France

Paris
France

Correspondence Information

Correspondence Customer Number::
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Electronic Mail One::

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Application Information

Title Line One::
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Docket Number::

DIAGNOSIS AND TREATMENT OF MEDICAL CONDI
TIONS ASSOCIATED WITH DEFECTIVE NFKAPPA
B(NF-κB) ACTIVATION
HO-P01961US1

Representative Information

Representative Customer Number::

26,271

Continuity Information

This application is a::
>Application One::
FilingDate::

Non Prov. of Provisional
60/206,223
May 22, 2000

60622360

FOE 60 640 3360

Inventor Information

Inventor Six Given Name:: Annemarie
Family Name:: Poustka
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Country:: Germany
Postal or Zip Code::
City of Residence:: Heidelberg
Country of Residence:: Germany

Correspondence Information

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Application Information

Title Line One:: DIAGNOSIS AND TREATMENT OF MEDICAL CONDI
Title Line Two:: TIONS ASSOCIATED WITH DEFECTIVE NFKAPPA
Title Line Three:: B(NF-κB) ACTIVATION
Docket Number:: HO-P01961US1

Representative Information

Representative Customer Number:: 26,271

Continuity Information

This application is a:: Non Prov. of Provisional
>Application One:: 60/206,223
FilingDate:: May 22, 2000

Inventor Information

Inventor Seven Given Name::	Nina
Family Name::	Heiss
Postal Address Line One::	
City::	Heidelberg
Country::	Germany
Postal or Zip Code::	
City of Residence::	Heidelberg
Country of Residence::	Germany

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Application Information

Title Line One::	DIAGNOSIS AND TREATMENT OF MEDICAL CONDI
Title Line Two::	TIONS ASSOCIATED WITH DEFECTIVE NFKAPPA
Title Line Three::	B(NF-κB) ACTIVATION
Docket Number::	HO-P01961US1

Representative Information

Representative Customer Number::	26,271
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Continuity Information

This application is a::	Non Prov. of Provisional
>Application One::	60/206,223
FilingDate::	May 22, 2000

Inventor Information

Inventor Eight Given Name:: Michele
Family Name:: D'Urso
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Country:: Italy
Postal or Zip Code::
City of Residence:: Napoli
Country of Residence:: Italy

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Application Information

Title Line One::
Title Line Two:: DIAGNOSIS AND TREATMENT OF MEDICAL CONDI
Title Line Three:: TIONS ASSOCIATED WITH DEFECTIVE NFKAPPA
Docket Number:: B(NF-κB) ACTIVATION
HO-P01961US1

Representative Information

Representative Customer Number:: 26,271

Continuity Information

This application is a:: Non Prov. of Provisional
>Application One:: 60/206,223
FilingDate:: May 22, 2000

Inventor Information

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Family Name:: Lewis
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Country:: U.S.A.
Postal or Zip Code:: 77024
City of Residence:: Houston, Texas
Country of Residence:: U.S.A.

Correspondence Information

Correspondence Customer Number:: 26,271
Telephone One:: (713) 651-3735
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Application Information

Title Line One::
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Representative Information

Representative Customer Number:: 26,271

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This application is a:: Non Prov. of Provisional
>Application One:: 60/206,223
FilingDate:: May 22, 2000

Inventor Information

Inventor Ten Given Name::
Family Name::
Postal Address Line One::
City::
Country::
Postal or Zip Code::
City of Residence::
Country of Residence::

David L.
Nelson

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U.S.A.

Houston, Texas
U.S.A.

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DIAGNOSIS AND TREATMENT OF MEDICAL CONDI
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HO-P01961US1

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Representative Customer Number::

26,271

Continuity Information

This application is a::
>Application One::
FilingDate::

Non Prov. of Provisional
60/206,223
May 22, 2000

Inventor Information

Inventor Eleven Given Name::
Family Name::
Postal Address Line One::
City::
Country::
Postal or Zip Code::
City of Residence::
Country of Residence::

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Aradhya
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77030
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B(NF- κ B) ACTIVATION
HO-P01961US1

Representative Information

Representative Customer Number::

26,271

Continuity Information

This application is a::
>Application One::
FilingDate::

Non Prov. of Provisional
60/206,223
May 22, 2000

602650 64069860

Inventor Information

Inventor Twelve Given Name:: Moise
Family Name:: Levy
Postal Address Line One:: 9627 Windswept
City:: Houston, Texas
Country:: U.S.A.
Postal or Zip Code:: 77063
City of Residence:: Houston, Texas
Country of Residence:: U.S.A.

Correspondence Information

Correspondence Customer Number:: 26,271
Telephone One:: (713) 651-3735
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Application Information

Title Line One::
Title Line Two:: DIAGNOSIS AND TREATMENT OF MEDICAL CONDI
Title Line Three:: TIONS ASSOCIATED WITH DEFECTIVE NFKAPPA
Docket Number:: B(NF-κB) ACTIVATION
HO-P01961US1

Representative Information

Representative Customer Number:: 26,271

Continuity Information

This application is a:: Non Prov. of Provisional
>Application One:: 60/206,223
FilingDate:: May 22, 2000